Agenda Item:

<u>**Equality & Inclusion Committee - [11ᵗʰ August 2021]**</u>
[Workforce Disability Equality Standard]

Purpose of report and executive summary (250 words max): The purpose of this paper is to highlight the Workforce Disability Equality Standard (WDES) report, including data analysis and action plan for 2021. The WDES report shows that a large number of staff have not stated if they have a disability, therefore this report is based on a relatively small sample and we believe there are many more people with an undeclared disability in the Trust. The data shows that many disabled staff believe the Trust does not provide equal opportunities for progression & promotion, despite disabled staff being more likely to be appointed into a role from shortlisting; there are also greater disparities in other areas such as more disabled staff feeling pressured to come into work when unwell and the extent to which disabled staff feel the organisation values their work. The actions identified for each indicator demonstrate work taking place or planned specifically around improving the experiences of disabled staff, and also around improving organisational culture that these staff are part of. The Inclusion & Equalities Committee is asked to agree and sign off the content and proposed action plan for 2021-2022.
Action required: For approval
Previously considered by: **NA**

Director: **Chief People Officer**	Presented by:	Author:

Trust priorities to which the issue relates:		**Tick applicable boxes**
Quality:	To deliver high quality, compassionate services, consistently across all our sites	☒
People:	To create an environment which retains staff, recruits the best and develops an engaged, flexible and skilled workforce	☒
Pathways:	To develop pathways across care boundaries, where this delivers best patient care	☐
Ease of Use:	To redesign and invest in our systems and processes to provide a simple and reliable experience for our patients, their referrers, and our staff	☐
Sustainability:	To provide a portfolio of services that is financially and clinically sustainable in the long term	☒

Does the issue relate to a risk recorded on the Board Assurance Framework? (If yes, please specify which risk)   009/21
Any other risk issues (quality, safety, financial, HR, legal, equality):   Equality

Proud to deliver high-quality, compassionate care to our community

Workforce Race Disability Standard

2021

NHS East and North Hertfordshire NHS Trust

NHS England, with its partners, has prioritised its commitment to tackling discrimination and creating an NHS where the talents of all staff are valued and developed. The Workforce Disability Equality Standard (WDES) came into force on 1st April 2019. It is mandated through the NHS Standard Contract. The WDES evolved from the design of the WRES with some adaptive changes. There are ten metrics that enable NHS organisations to compare the experiences of Disabled and non-Disabled staff, which they will then use to implement action plans. The Trust is required to submit the data set using the national format. The full 10 WDES metrics report are included - appendices in excel format.

WDES Indicators	NHS Staff Survey 2018		NHS Staff Survey 2019		NHS Staff Survey 2020	
***WDES 1 & WDES 10 - PLEASE REFER TO THE ATTACHED APPENDICES	Disabled members of Staff	Non-Disabled members of Staff	Disabled members of Staff	Non-Disabled members of Staff	Disabled members of Staff	Non-Disabled members of Staff
WDES 2 - Relative likelihood of non-Disabled staff compared to Disabled staff being appointed from shortlisting across all posts.	1.62	NA	2.41	NA	0.52	NA
WDES 3 - Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.	0.00	NA	0.00	NA	0.00	NA
WDES 4 - a) Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from: i. Patients/service users, their relatives or other members of the public ii. Managers iii. Other colleagues b) Percentage of Disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.	35.5% 25.0% 27.0% 40.0%	30.1% 16.0% 21.0% 41.0%	36.5% 23.7% 28.1% 38%	28.3% 14.7% 20.1% 41%	35.9% 24.4% 26.1% 41%	25.5% 14.0% 18.8% 42%
WDES 5 - Percentage of Disabled staff compared to non-disabled staff believing that their organisation provides equal opportunities for career progression or promotion.	76%	82%	75%	84%	73%	81%
WDES 6 - Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.	36%	24%	34%	26%	38.4%	26%
WDES 7 - Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	33%	45%	33%	50%	32%	48%
WDES 8 - Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.	77%		73%		74.7%	
WDES 9 - a) The staff engagement score for Disabled staff, compared to non-disabled staff and the overall engagement score for the organisation	6.4	7.0	6.4	7.0	6.5	7.0
WDES 9 - b) Has your organisation taken action to facilitate the voices of your Disabled staff to be heard? (yes) or (no)	Yes – via the Disabled Staff Network and Disability Confident framework.					

Key Findings – Narrative & Action Plan

WDES Action Plan		
WDES 1 – Percentage of staff in AFC pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with percentage of staff in the overall workforce	There is significant under-reporting in the Trust on disability with 162 stating they have a disability compared to 2,064 that have not stated; therefore the focus for the year ahead is to encourage people to declare if they have a disability while creating a culture and environment where people feel 'safe' to do so.	
Milestone	**Increase number of staff reporting a disability across all pay bands and sub groups**	
Actions	**Description**	**Timescale**
1a.	Implement a scoping programme to better understand the reasons for people not disclosing disabilities with key networks; co-produce a programme of work that results in an increase in reporting.	Sept – Nov 2022
1b.	Implement campaign to increase declaring a disability through initiatives that say how to do this, sharing the benefits of declaring, increasing knowledge of access to equipment and highlighting disabled role models across the Trust.	Nov – Jul 2022
WDES 2 - Relative likelihood of non-Disabled staff compared to disabled staff being appointed from shortlisting from across all posts.	The likelihood of a disabled person being appointed over a non-disabled person has increased year on year since 2018. To ensure this metric continues to progress in an upward trend, and recognising there may be many more staff with undeclared disabilities, we will review the way we make appointments, and identify any themes where further support may be needed for disabled people to succeed at interview.	

Milestone	Continue on upward trajectory for number of disabled people being appointed at interview from shortlisting.	
Actions	**Description**	**Timescale**
2a.	Review of Trust recruitment and selection policies and courses, ensuring EDI references are consistent and agreed. Work with ICS to review policies at system level where feasible.	Sept – Mar 2022
2b.	Ensure the talent pool is inclusive of disabled staff and implement demonstrable changes that will upskill this group to be successfully appointed to roles. Work with local user led organisations and charities to actively promote and recruit disabled people.	Aug – Jan 2022
2c.	Review secondment processes and policies including data, accessibility to all, and parameters of secondments, linking to performance and talent management schemes.	Sept – Dec 2021
2d.	Review number of disabled staff taking part in the guaranteed interview scheme	Sept – Dec 2022
2e.	Interview Feedback – Implement guidance for interviewers on giving constructive feedback to interviewees. Communicate guidance through various mediums to enable the message to reach all potential panel members.	Aug – Dec 2021
2f.	Explore options to upskill members of the Disability Network to support peers through the interview process such as coaching & mentoring.	Oct – Feb 2022

WDES 3 - Relative likelihood of disabled staff compared to non-disabled staff entering the formal capacity process, as measured by entry into the formal capacity procedure.	While data is not available for this indicator, we will conduct a multi-disciplinary review of all capacity procedure outcomes over a one year period, to help us identify any themes relating to poorer experiences and outcomes for disabled staff. A review of formal capacity policies and procedures is also planned through an Equality, Diversity & Inclusion lens to include the lived experiences of disabled people.	
Milestone	**Complete review of disciplinary process outcomes over the last 12 months. Conduct review of capability policies and procedures to ensure these do not have a disproportionate impact on disabled staff.**	
Actions	**Description**	**Timescale**
3a.	Systematic review of disciplinary policies and procedures, in partnership with the ICS where feasible.	Sept – Mar 2022
3b.	Convene a multi-disciplinary panel involving key stakeholders to conduct a review of the outcomes for all disciplinary procedures undertaken in the last 12 months	Sept – Jan 2022
3c.	Produce action plan using learning from disciplinary outcomes review to address any disparities in this area.	Jan – Jun 2022
WDES 4 – a) Percentage of disabled staff compared to disabled staff experiencing harassment, bullying or abuse from: i. Patients/service users, their relatives or other	Disabled staff report higher rates of harassment, bullying or abusive behaviour from all three groups listed in this indicator. For 2020, the gap between the experiences of disabled and non-disabled staff ranges from 10 to 12 percentage points. To address issues around harassment, abuse and bullying, a trust wide programme is being implemented in clinical and corporate settings to improve organisational culture. The programme includes approaches such as using healthy leadership rhythms, human factors training, a 'Civility saves lives' initiative and staff networks supporting colleagues in clinical settings.	

members of the public ii. **Managers** iii. **Other colleagues**	Work is ongoing in specific settings such as mental health wards where a more supportive infrastructure is being developed that addresses aggressive and violent behaviour towards staff specifically from groups accessing our services. Within this work, a strong element of hearing the experiences of, and supporting disabled staff is being embedded including: • Reciprocal mentoring between disabled staff and senior leaders to increase understanding of people's experiences that will influence approaches in the organisation – both operationally and strategically • Offering opportunities for staff networks to develop coaching and mentoring skills to support people experiencing difficulties in clinical settings • Ensuring mental health first aider programme is inclusive and accessible to disabled staff and disabled staff in Freedom to Speak Up champion roles • Increasing communication channels between disabled and non-disabled staff to understand each other's experiences and impact of micro-aggressions in the workplace
b) Percentage of disabled staff compared to non-disabled saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.	The gap between disabled and non-disabled staff reduced from 3 percentage points in 2019 to 1 percentage point in 2020, which may be the result of a campaign in clinical settings to report harassment, abuse and bullying behaviour particularly from people that use our services. The programme outlined in indicator 4a. will work to ensure disabled staff feel able to report unacceptable behaviour.
Milestones	**Review of processes that tackle harassment, bullying & abuse from patients and relatives including a review of their implementation across the Trust**

Actions	Description	Timescale
4a.	Continue with the delivery of cultural improvement programmes in clinical settings, ensuring that the voices and experiences of disabled people influence the direction of this work	Aug – July 2022

4b.	Implement reciprocal mentoring programme between disabled staff and senior leaders to increase learning of the experiences of their experiences amongst senior leaders.	Sept – Aug 2022
4c.	Complete review of all activity relating to improving the experiences of disabled staff and improving organisational culture	Aug – Oct 2021
4d.	Continue to promote positive leadership skills in line managers ensuring that issues raised by disabled staff are responded to in a timely and appropriate manner.	Sept – Aug 2022
4e.	Implement interventions to address bullying, abuse and harassment as agreed through review of activity such as the civility & respect toolkit.	Aug – Jun 2022
4f.	Ensure Mental Health First Aider and Freedom to Speak Up programmes are inclusive of and accessible by disabled people.	Sept – Jan 2022
4g.	Review policies and processes in place to address bullying, abuse and harassment – link in with ICS to do this work at a system level as appropriate.	Aug – Jun 2022
WDES 5 - Percentage of disabled staff compared to non-disabled staff believing that their organisation provides equal opportunities for career progression or promotion	Although disabled staff are more likely to be appointed from shortlisting compared to non-disabled staff, last year saw the biggest gap between these two groups in believing the organisation provides equal opportunities for career progression and promotion. A number of factors may be causing this disparity: • Disabled staff are concerned that disclosing a disability will affect their career progression within the organisation • As there are high levels of staff that do not disclose if they have a disability at all levels, there is a lack of senior role models that provide assurance and confidence to people • Currently there is a non-unified approach to how communications and messages are adapted to ensure they reach different audiences, including people with disabilities; this is leading to a feeling of exclusion amongst disabled staff	

Milestone	Implement a programme of activity that increases confidence amongst disabled people that the Trust provides equity of opportunity for career progression and promotion	
Actions	**Description**	**Timescale**
5a.	As part of campaign to increase disclosure of disabilities, introduce an element where people in senior or specialist positions talk about successes in their career while having lived experience of a disability; consider including staff that also care for someone with a disability or long term condition.	Aug – July 2022
5b.	Complete audit of communications across the Trust and implement changes where needed to ensure messages are accessible and inclusive for disabled staff.	Sept – Jan 2022
5c.	Monitor number of disabled staff accessing the 'guaranteed interview scheme' and implement changes if there is a disparity between number of people accessing the scheme and people disclosing a disability. Note: This action has a staggered start date to enable work to disclose disabilities to be implemented.	Jan – May 2022
WDES 6 - Percentage of disabled staff compared non-disabled staff saying that they have felt pressure from their manager to come to work,	The gap between disabled and non-disabled staff has been slowly closing for this indicator therefore work in progress needs to continue. Despite this, the gap is still around 8 percentage points which may be linked to indicator 4 where higher numbers of disabled staff report experiences of harassment, bullying or abuse from their managers, this may be resulting in disabled people feeling pressured to come to work.	

despite not feeling well enough to perform their duties.	Anecdotally, the Disabled Member's Network hears that there is a perceived hierarchy between different types of disability resulting in some staff with hidden disabilities feeling their condition doesn't warrant time off i.e. a mental health condition. If this is an issue amongst the workforce, whether disabled or non-disabled and regardless of their role in the Trust, we will do more to raise awareness of different types of disability to positively impact this indicator.
Milestones	**Promote understanding of visible and hidden disabilities and the importance of a flexible approach across the Trust, prioritising those that have line management responsibilities.**

Actions	Description	Timescale
6a.	Implement a programme of conversations between disabled and non-disabled staff that impact on attitudes and behaviours around disability.	Sept – Apr 2022
6b.	Continue work in the Trust to support shielding staff through increased line manager contact, wellbeing conversations and providing opportunities for growth and development while shielding.	Aug – Apr 2022
6c.	Review policies and processes for flexible working and sickness related absence, and ensure they are implemented in an equitable way.	Sept – Jan 2022

WDES 7 - Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	This indicator has seen the largest percentage gap of 16 points between disabled and non-disabled staff in 2020, in the previous two years the gap had been around 7-8 percentage points.

The change in trend may be due to many disabled staff shielding during the pandemic, and their experiences during this time. Our staff networks tell us that many shielding staff reported experiences ranging from technical issues in accessing work material, irregularity of contact and support from line managers – particularly where line managers were re-deployed to other roles, and feeling pressured to return to work. In the year ahead, there will be an increased focus on improving a |

	sense of inclusion and belonging amongst disabled staff including: • Ensuring communications to staff and feedback requested are appropriate for and inclusive of disabled staff • Improving experiences of shielding staff through better health and wellbeing support, improved technology, appropriate return to work plans and access to growth and development initiatives • Identifying positive role models – particularly in senior positions – and inviting them to share their experiences of achieving their career goals while having lived experience of a disability
Milestone	**Implement programme of work that increases a sense of inclusion and belonging amongst disabled staff and increasing satisfaction with the extent to which the Trust values their work.**

Actions	Description	Timescale
7a.	Continue to be part of the Disability Confident Framework.	Ongoing

WDES 8 - Percentage of disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work	This indicator has increased slightly since last year and work will take place in the next year to continue this upward trend. We will ensure that all staff, particularly those with line management responsibilities, are aware of reasonable adjustments available for disabled staff, and ensure senior managers are promoting a culture where adjustments such as flexible working are encouraged; as well as an understanding of the support the Access to Work programme and the Health at Work team can provide. The introduction of disability passports is currently being explored that can be carried by staff with disabilities to highlight adequate adjustments they need. We will also work collaboratively with the staff networks to complete anecdotal surveys to gain a deeper understanding of the experiences of disabled staff in accessing adequate adjustment(s).
Milestones	**Promote support available to disabled staff including reasonable adjustments to workforce – particularly those with line management responsibilities – and conduct anecdotal survey to understand the experiences of disabled staff in accessing and adequate adjustment(s).**

Actions	Description	Timescale
8a.	Demonstrate promotion of support available to disabled staff across workforce, particularly line managers.	Sept – Mar 2022
8b.	Implement disability passport scheme for staff with disabilities.	Sept – Aug 2022
8c.	Conduct surveys twice a year about adequate adjustment(s) amongst disabled staff.	Sept – Aug 2022
WDES 9 – a) The staff engagement score for disabled staff, compared to non-disabled staff and the overall engagement score for the organisation **b) Has your organisation taken action to facilitate the voices for your disabled staff to be heard? (yes) or (no)**	The gap in the engagement score between disabled and non-disabled staff has reduced slightly in the last year and we will work to continue closing this gap through the programme outlined in this report. Our ambition is to move beyond engagement of disabled staff to an approach where we co-produce work together, so disabled staff feel not only more engaged but also that their involvement is valued. One of the ways we will do this is working with the Disabled Member's Network to agree priorities and work programme that is being developed in response to our latest Access Audit. Yes – The Trust has a Disability Staff Network and is part of the Disability Confident Framework.	

Appendices

1. ## WDES 2020

WDES - V6.xlsx

2. ## WDES 2021

Copy of 2021 WDES
Data Collection Refere

3. ## Staff Survey 2020

NHS_staff_survey_20
20_RWH_summary.pd